## PART B - FEE(S) TRANSMITTAL

11.01.07

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M/C 480-410-20	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.							
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				SUSAN GF, SL a (Depositor's name)				
11/02/2007 FMETEKI2 00000043 500831 10539873				Succe (Signature)				
01 FC:1501 1440.00 DA						TD-31-6	57 (	Date)
02 FC+1504 APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO	, ]
10/539,873	06/17/2005	Anthony John Williams DP-309023 6386					_	
TITLE OF INVENTION: CAM ARRANGEMENT AND FUEL PUMP ARRANGEMENT INCORPORATING A CAM ARRANGEMENT								
<u>.</u>								
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	JE PREV. PAID ISSU	E.FEE	- TOTAL FEE(S) DUE	DATE DUE -	
nonprovisional	NO	\$1400	\$300	\$0		\$1700	11/28/2007	
EXAMINER ART		ART UNIT	CLASS-SUBCLASS					
GIMIE, MAHMOUD 3747			123-495000					
Change of correspondence address or indication of "Fee Address" (37  2. For printing on the patent front page, list  [FR 1.363).  (1) the names of up to 3 registered patent attorneys  1 David P. Wood								
* <b>–</b>		(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(2) the name of a single firm (having as a member a 2					
	lication (or "Fee Address 02 or more recent) attach	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)				
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
DELPHI TECHNOLOGIES, INC. IROY, MICHIGAN								
Please check the appropriate assignee category or categories (will not be printed on the patent):								
a. The following fee(s)	ara submittad:	41	Payment of Fac(s): (I	Place first roomaly a		iously paid issue fee sho	and about	—-j
Issue Fee		ny prev	lously paid issue lee sile	Jwn above)				
Publication Fee (No small entity discount permitted) Payment by cred				it card. Form PTO-2038 is attached.				
				ereby authorized to charge the required fee(s), any deficiency, or credit any Deposit Account Number				
Thange in Entity Sta	itus (from status indicate	d abova)	Overpayment, to D	eposit Account Numb	ei <u></u>	(enclose an e	xua copy of this for	111).
a. Applicant claim	ns SMALL ENTITY state	is. See 37 CFR 1.27.				ΓΙΤΥ status. See 37 CFR		
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